

## Financial Aid Application

To ensure that your application is assessed accurately and in a timely manner, please ensure that you submit this application and appropriate documentation as soon as possible.

Student Name

Social Security Number

Is this your first FA application at New Zealand College of Chiropractic?  YES  NO

Entrance Counselling completed (only required for first time borrowers at NZCC)  YES  NO

Master Promissory Note attached (You must complete each year for each type of loan)  YES  NO

Are you a dual US and NZ citizen?  YES  NO

Have you applied for New Zealand or Australian Permanent Residency?  YES  NO

Have you (or your parents on your behalf) applied for other types of aid (scholarship, grant, etc) to support your application for this award year?  YES  NO

If YES, please complete the following:

Scholarship/Grant Name

Funding applied for

Funding awarded

### Declaration and signature

I confirm that I have read, understood and agree to the policy outlined in the student handbook relating to academic progress (2.10) as it applies to students utilizing US Financial Aid.

I confirm that the funds awarded under the US Financial aid Programme for this award year will be used to support my educational expenses.

I agree and acknowledge that I may be required to pay back funds to New Zealand College of Chiropractic if through my actions whilst studying at this institution they have been required to reimburse funds to the US Department of Education, its approved lenders or guarantors.

I confirm that I will attend and enroll at New Zealand College of Chiropractic as stipulated in my offer package.

Student Signature

Date (Day/Month/Year)

<p><b>Submit to:</b> admissions@nzchiro.co.nz</p>	<p><b>Or by post to:</b> US Financial Aid New Zealand College of Chiropractic PO Box 113044 Newmarket, 1149 Auckland, New Zealand</p>	<p><b>Or by hand to:</b> Admissions Manager 6 Harrison Road Mt Wellington Auckland New Zealand</p>
---	---	--